PATENT APPLICATION FEE DETERMINATION RECO Effective November 10, 1998										09/433677					
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMAI TYP		ENTITY	OR	OTHER SMALL		
FOR			NUMBER FILED			NUMBER EXTRA			RATI		FEE]	RATE	FEE	
BASIC FEE											380.00	OR		760.00	
TOTAL CLAIMS			1	minus	20= *				X\$ 9	= :		OR	X\$18=		
INDEPENDENT CLAIMS				minus	3 = *				X39:	=		OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT								+130	_		OR	+260=			
* If the difference in column 1 is less than zero, enter "0" in column 2									TOTA	_	390.00	OR	TOTAL		
CLAIMS AS AMENDED - PART II										- Υ		,	OTHER	THAN	
(Column 1) (Column 2) (Column 3)										LLE	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		REM A	AIMS IAINING FTER NDMENT	g L	N PRI	IGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATI	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*		Minus	**		=	- 1	X\$ 9	=		OR	X\$18=		
	Independent	*	211 05 141	Minus	***		=		X39=	<u> </u>		OR	X78=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+130	_		OR	+260=		
٠	-				ī			ı	TOT ADDIT, F				TOTAL ADDIT. FEE	· ;	
			umn 1)			olumn 2)	(Column 3)						ADDII. 1 E.E.	,	
AMENDMENT B		REA A	LAIMS MAINING FTER NDMENT		N PRI	IGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	,	Minus	**		=		X\$ 9	=		OR	X\$18=		
	Independent			Minus +			=		X39=			OR	X78=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									+130:	_		OR	+260=	,	
						L			тот	AL			TOTAL		
	(Column 1) (Column 2) (Column 3)								ADDIT. F	EE L		J O	ADDIT. FEE		
~		Cl	AIMS		HIGHEST			Г		T	ADDI-	1		ADDI	
AMENDMENT C			IAINING FTER NDMENT	e de la companya de	PRE	UMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE		TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*		Minus	**		=		_X\$ 9=	.	~	OR	X\$18=		
	Independent	*		Minus			=		X39=	1			X78=	:	
	FIRST PRESE	JLTIPLE DEF	PLE DEPENDENT CLAIM			ŀ	+130=	\dashv		OR		<u> </u>			
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+260=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."															
	The "Highest Num	ber Pre	viously Pai	d For" (Total o	Indep	endent) is the	highest number	r foui	nd in the	арр	ropriate box	in col	umn 1.		

Application or Docket Number